**Daily Sleep Diary**

Complete the diary every day.

Put exact times for everything except the time you fell asleep.

1. The time you go to bed to sleep/lights out etc.
2. Approx. what time did you fall asleep – guess because you need to remove all clocks/devices with the time on as this is just a constant reminder that we are not asleep.
3. How many times we wake turn over/go to the loo/get up etc.
4. The time you woke yourself as we often wake up before we are woken – Alarm clock etc.
5. Total hours and this should help to see a pattern in quantity needed.
6. How was the quality of that night’s sleep?

Your Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ The date of Day 1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Enter the day (Mon, Tues, Wed, etc.) | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 |
| 1 | At what time did you go to bed last night? |  |  |  |  |  |  |  |
| 2 | How long did it take you to fall asleep? |  |  |  |  |  |  |  |
| 3 | How many times did you wake up in the night? |  |  |  |  |  |  |  |
| 4 | What time did you wake up? (Not woken) |  |  |  |  |  |  |  |
| 5 | Total hours asleep in 24 (including naps in the day) |  |  |  |  |  |  |  |
| 6 | How would you rate the quality of your sleep?  1 2 3 4 5  V. Poor V. Good |  |  |  |  |  |  |  |

What is your bedtime routine?.............................................................................................................................

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If you are not getting enough sleep, you may need to change your routine.

What are the patterns you can see in your diary? Are there any habits you can change?

Remember it is the quality of your sleep that is important – not the quantity. If you are rested and refreshed with 6 hours, then that is what works for you.

Look at our Sleep Facts and Tips for Sleep Hygiene sheets for more ideas and information.

